



May 10, 2021

Announcement 2498

List of Group Providers Who Should Not Have Individuals Linked to Them and an Update Regarding Claims Denied with Error Code 1008

Group providers that are not allowed to have individual providers linked to them may have had their claims deny if individuals were linked to them. Effective June 15, 2020, the Medicaid Management Information System (MMIS) was updated to automatically remove the group linkages that are not allowed. Group providers who should not have individuals linked to them are listed in the table below.

Professional, professional crossover and dental claims with dates of service on or after May 1, 2019, through June 15, 2020, that denied with error code 1008 (Billing provider is not a group/performing provider is a group provider) have been automatically reprocessed. Results of the reprocessed claims appear on remittance advices dated May 14, 2021. No institutional claims were impacted, so no institutional claims were included in this claim reprocessing effort.

Please note: When claims are reprocessed, please be aware that all system and clinical claim editor edits are applicable. As a result, there may be no additional payment, and other claim denials may be received. Providers have the right to appeal denied claims, including those denied upon reprocessing. Please refer to [Medicaid Services Manual Chapter 100](#) and the [Billing Manual](#) for information concerning the claim appeal process and time frames.

Group provider types who should not have individuals linked to them are:

Provider Type	Provider Type Description
10	Outpatient Surgery, Hospital Based
11	Hospital, Inpatient
12	Hospital, Outpatient
13	Psychiatric Hospital, Inpatient
16	Intermediate Care Facilities for Individuals with Intellectual Disabilities / Public
17	Special Clinics
19	Nursing Facility
23	Hearing Aid Dispenser & Related Supplies
27	Radiology and Non-invasive Diagnostic Centers
28	Pharmacy
29	Home Health Agency and Private Duty Nursing Services
30	Personal Care Services - Provider Agency
32 Specialty 932	Ambulance, Air or Ground
33	Durable Medical Equipment (DME), Disposable, Prosthetics
39	Adult Day Health Care
41	Optician, Optical Business
43	Laboratory, Pathology Clinical
44	Swing-bed, Acute Hospital
45	End Stage Renal Disease (ESRD) Facility

Provider Type	Provider Type Description
46	Ambulatory Surgical Centers
47	Indian Health Services (IHS) and Tribal Clinics
48	Home and Community Based Waiver for the Frail Elderly
51	Indian Health Service Hospital, Inpatient (Tribal)
52	Indian Health Service Hospital, Outpatient (Tribal)
54	Targeted Case Management
55	Day and Residential Habilitation Services
56	Inpatient Rehabilitation and Long Term Acute Care (LTAC) Specialty Hospitals
57	Home and Community Based Waiver for the Frail Elderly (Elderly in Adult Residential Care)
58	Home and Community Based Waiver for Persons with Physical Disabilities
59	Home and Community Based Waiver for the Frail Elderly (Augmented Personal Care Services)
60	School Health Services (SHS)
63	Residential Treatment Centers (RTC)
64	Hospice
65	Hospice, Long Term Care
68	Intermediate Care Facilities for Individuals with Intellectual Disabilities / Private
75	Critical Access Hospital (CAH), Inpatient
78	Indian Health Service Hospital, Inpatient (Non-Tribal)
79	Indian Health Service Hospital, Outpatient (Non-Tribal)
81	Hospital Based ESRD Provider
83	Personal Care Services - Intermediary Service Organization